Child Fatality Summary

Child's Name: Mikayla Baker County: Seminole

Report Number: 2017-223101

Family Composition Chart

Name	Age at Time of the Incident	Relationship with Deceased Child
Mikayla Baker	5 months old	Child Victim
Lori Kozielski	50 years old	Foster Mother
Joshua Kozielski	21 years old	Foster Mother's Son
Melissa Baker	28 years old	Mother

Circumstances Surrounding Death

On August 6, 2017, the five-month-old child passed away after suffering head trauma on July 31, 2017.

According to the family, the following information was provided.

On February 17, 2017, Mikayla was born six weeks premature and tested positive for cocaine. She was sheltered from her mother and placed in medical foster care.

On July 31, 2017, the foster mother found Makayla breathing abnormally. Mikayla was taken to the hospital and found to have a severe cerebral hemorrhage. The cause of Mikayla's injuries was suspected to be inflicted trauma, although the source of the injuries was unknown. Mikayla was residing in a licensed foster home with her foster mother, the foster mother's adult son, and two children at the time the injuries occurred. Medical interventions at the hospital were unsuccessful and Mikayla passed away six (6) days after her admission.

The foster mother's son, Joshua, stated he was in his room sleeping when he heard Mikayla breathing in an odd manner. Joshua went in her room and Mikayla was not breathing properly. He put his ear to her chest and her heart was beating fast and hard. She would not respond to anything but sounds. His mother was in the room sleeping. No one else was up when he went to check on the child. Joshua then went back to sleep and his mother later woke him up to check on Mikayla. When he went and checked on her again she was not breathing right so he felt for her pulse, picked her up and she was not moving. Joshua told his mother Mikayla was not moving and it all was not making sense to him. His mother also noticed Mikayla was not breathing correctly, she tapped the child and felt for her pulse as well. This foster mother called 911 at 7:01

a.m. because she felt something was wrong. Before everyone went to sleep the night before, Joshua recalled the mother feeding the baby at approximately 8:00 p.m. and throughout the night he did not hear Mikayla crying nor did he hear anyone walking around the home or near her room. He was the only one that checked on the baby. When he realized the child was not breathing correctly the first time he went in the room he did tell his mother. He denies knowing why the Mikayla was breathing the way she was when he checked on her. He says that it could have been a seizure, but he doesn't know for sure.

On August 6, 2017, Mikayla Baker was pronounced deceased at 8:52 p.m.



On September 24, 2018, the State Attorney's Office (SAO) advised the case was closed out as there was insufficient evidence for an arrest due to the Medical Examiner's Undetermined Manner of Death. The SAO advised law enforcement was of the opinion that Joshua was coached by the mother. Joshua admitted he shook Mikayla, however, he also stated that he did not want his mom to get into trouble and that he was helping his mom in this case.

On January 30, 2019, the investigation was closed with:

- Verified Findings of Death, Physical Injury, and Internal Injuries as to Mikayla Baker, with Joshua Kozielski as the caregiver responsible.
- Verified Findings of Death, Physical Injury, Internal Injuries, and Inadequate Supervision as to Mikayla Baker, with Loris Kozielski as the caregiver responsible.

The foster home no longer has any foster children and it has been closed.

On August 8, 2017, District Nine Associate Medical Examiner Jesse C. Giles, M.D., completed an autopsy of Mikayla Baker. ME# 17-09-01229.

Cause of Death: Hypoxic Encephalopathy, due to Focal Cerebral Subarachnoid and Subdural Hemorrhage with Cerebral Edema, due to Undetermined Etiology.

Manner of Death: Undetermined

Autopsy Findings:

History:

- I. History:
 - a. Infant with past medical history of prematurity (born at 34 weeks gestation) with in utero Cocaine and opiate exposure, and infant foster care.
 - b. Pediatric follow-ups showing good bust some developmental delay
 - c. Admitted to first hospital July 31, 2017 at 0208 hours, for change in mental status with suspected seizure activity and unresponsiveness, with possible inflicted "shaking" injury history.
 - d. Transferred to second hospital and admitted July 31, 2017 at 0510 hours
 - e. Hospital workup showing "early subacute" subarachnoid and subdural right parieto-occipital hemorrhages, retinal hemorrhages, respiratory failure with additional seizure-like activity, and global hypoxic ischemic brain injury
 - f. Brain death in hospital on August 6, 2017
 - g. Subsequent multi-organ harvesting (heart, liver, kidneys, adrenal glands, pancreas, and liver) on August 7, 2017.
- II. Status post placement and removal of extraventricular drain and intracranial pressure monitor at right parietal head
- III. Superficial pale contusion of low lateral right forehead
- IV. Frontoparietal and sagittal suture widening, with subgaleal hemorrhage over frontoparietal sutures
- V. No other external head, face, or neck trauma noted, and no skull fracture, rib fracture, body wall contusion, extremity, or organ trauma found
- VI. No organ or other trauma reported by organ harvesting team
- VII. Brain swelling, right posterior parietal and parieto-occipital subarachnoid hemorrhage, small right posterior subdural hematoma, hypoxic encephalopathy, and autolysis of brain, all relatively acute
- VIII. Bilateral perineural optic nerve hemorrhage and multifocal retinal hemorrhage of both eyes, with acute and subacute inflammation along left optic nerve (including eosinophils)
 - IX. Multiple bilateral pleural hemorrhages, without lung parenchymal hemorrhage
 - X. No other organ disease reported by organ harvesting team

Conclusion: In consideration of the circumstances surrounding the death, and after examination of the body, review of available medical and other records, and review of the toxicologic analyses and histologic preparations, it is my opinion that the hospital death of Mikayla Baker, a 5 month 19 day old white female infant with the above complex history, is the result of hypoxic encephalopathy from focal cerebral subarachnoid and subdural hemorrhage with cerebral edema, from undetermined etiology.

The hospital CT scans of the head, taken on the day of admission (8 days before autopsy) were reported as showing areas of subarachnoid and subdural hemorrhage, and similar areas of these were found at autopsy. However, these were relatively limited in size and microscopically showed no significant aging – all appeared to be much closer in time to the death than to the admission. It could be that the initial findings on the CT were smaller and overshadowed by the final changes, worsened by the ensuing edema, hypoxia, and autolysis, or it could be that those processes affected the circulation and aging of the blood and damaged tissue, keeping them from passing through more typical inflammatory changes; only the changes around the optic nerves were older lesions and had inflammation, including eosinophils. The presence of the subarachnoid and subdural hemorrhages at the outset of the course does not support a trauma origin for them and for the death, but the final autopsy findings are less impressive than expected from those initial findings. The death thus remains unexplained and suspicious for non-accidental blunt head trauma. The manner of death is undetermined.

This report met the requirements for a Critical Incident Rapid Response Team review; please refer to that report for additional information regarding the family's prior history.

Other Children in the Family:

with Ms. Kozielski.

Grief counseling information was provided to the family and foster family.

Summary of Current Agency Involvement with Family

Mikayla was born six weeks premature on February 17, 2017 and tested positive for cocaine at birth. She was sheltered from her mother and initially placed in medical foster care.

Summary of Prior Agency Involvement with Family

Mikayla Baker was born prematurely at 32-34 weeks gestation on February 15, 2017,

by the mother, Melissa
Baker. Ms. Baker tested positive for cocaine upon admission to the hospital. A urine
toxicology screen on Mikayla was also positive for cocaine. Ms. Baker admitted to using
cocaine several times during her pregnancy and 24 hours prior to delivery. Additionally,
Ms. Baker had a criminal history that included

The investigation was closed with verified findings of illicit substance misuse.
Mikayla was sheltered from Ms. Baker and remained in the Neonatal Intensive Care
Unit for 30 days prior to being placed in a medical foster home. On June 16, 2017, after
90 days in a medical foster home, Mikayla was placed in a traditional family foster home

	. It was noted by the ested in October 2016 departments but later
appeared at arraignment on May 23, 2017, and agreed to court- Following the arraignment, the case manager made multiple uns contact at his home address and via telephone.	
The foster mother, Ms. Kozielski, moved to Florida from New Je	rsey in January 2015
been a foster parent for medically complex children in New Jers moving to Florida. Ms. Kozielski became a licensed foster paren	
2015.	
Mikayla was residing in Ms. Kozielski's foster home, it was reposustained a severe cerebral hemorrhage that was indicative of a 2017, it was reported that Mikayla was deceased as a result of h	abuse. On August 6,
Central Region Child Fatality Prevention Specialist Kirby Morgan	2/(2/(9 Date
Central Region Family Safety Program Manager	2-7-19 Date
Alger Studstill	Date